



STATE OF NEW HAMPSHIRE
DEPARTMENT OF EDUCATION
DIVISION OF PROGRAM SUPPORT
Bureau of Credentialing
101 Pleasant Street, Concord, NH 03301
Phone: 603-271-2408 Fax: 603-271-4134

Duplicate Credential Request

To request a duplicate of your current New Hampshire Teachers Credential.

PAYMENT: The check is made out to the State of New Hampshire in the amount of \$20.00 and should be mailed to the above address.

Please mail a copy of my New Hampshire teaching credential to:

Please Print or Type: * - required fields

*Teacher # _____ or Social Security Number _____ - _____ - _____

Name: _____
* Last Name * First Name * MI * Maiden

* Mailing Address _____

_____ * City * State * Zip

_____ * Telephone number Alt. Telephone * Email Address

Teacher's Signature

Date

PLEASE NOTE: United States Postal Mail will NOT be forwarded if your address changes after we receive this form. You must notify us of your new address, and/or change of name. Credentials will NOT be mailed to your place of employment.